

**OFFICE USE ONLY**

PETROFUND TRACKING # \_\_\_\_\_

ENTERED \_\_\_\_\_

**MINNESOTA PETROLEUM TANK RELEASE  
COMPENSATION BOARD**

## Application for ABANDONED UNDERGROUND STORAGE TANK REMOVAL

**I. PROPERTY OWNER INFORMATION**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Day Phone \_\_\_\_\_ Ext \_\_\_\_\_ Fax \_\_\_\_\_

**Do you currently own the abandoned tank(s) specified on this application?**    ☐ Yes    ☐ No

If "No," please list the name, address, and telephone number of the abandoned tank owner:

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

**II. UNDERGROUND STORAGE TANK LOCATION INFORMATION**

Site/Facility Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ MN    Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ County \_\_\_\_\_

**Are there any pump islands present at the site?**    ☐ Yes    ☐ No    **If so, how many?** \_\_\_\_\_**What kind of surfacing overlies the tank(s)?** \_\_\_\_\_**Is any tank partially or totally under a building or other obstruction?**    ☐ Yes    ☐ NoIf "Yes," please explain (*attach additional sheets if necessary*): \_\_\_\_\_

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### III. UNDERGROUND TANK INFORMATION

Please complete the table below for the abandoned UST(s) at this location.

Tank Number	Tank capacity (gallons)	Tank contents	Date tank was taken out of service*	Reason tank was taken out of service
1				
2				
3				
4				

\* If the tank was taken out of service on or after December 22, 1988, or if you do not know when it was taken out of service, please attach a detailed explanation of how you discovered the tank, along with documentation showing when you purchased the property.

### IV. APPLICANT CERTIFICATION

I certify that I own the property and tanks and that the taxes are current at the location described above;

I waive and release all claims against the state and its officers, agents, and employees for damages resulting directly or indirectly from the tank pulling or soil removal;

I agree to transfer ownership of the tanks and their contents to the state upon removal;

I agree that the state will fill the excavation back to grade after tank removal, but will not replace or repair any surfaces (i.e. concrete, asphalt, rock, gardens, landscaping, etc.) removed or damaged during tank removal;

I, the owner of the property described on this form, consent to officers, agents, employees, and authorized representatives of the state of Minnesota entering and having continued access to the property for the removal of abandoned underground storage tanks and petroleum-contaminated soil. I also agree that if I am determined by the Minnesota Pollution Control Agency (MPCA) to be a Responsible Person for a release from the tank(s) identified in this application, I will complete any necessary investigation and cleanup work required by the MPCA.

I agree to fully cooperate with the Petrofund Board and the Minnesota Pollution Control Agency; and

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

#### NOTARIZATION

Signature \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day

Name (print/type) \_\_\_\_\_

of \_\_\_\_\_, 20 \_\_\_\_ .

Title \_\_\_\_\_

Notary Public \_\_\_\_\_

Date Signed \_\_\_\_\_

[Stamp]

My commission expires \_\_\_\_\_

**Please send this application and accompanying documents to:**

**MINNESOTA DEPARTMENT OF COMMERCE - PETROFUND  
85 SEVENTH PLACE EAST, SUITE 500  
ST. PAUL, MN 55101-2198  
(651) 539-1515 OR (800) 638-0418**